Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for	Joanne First name	 First name
	example, your driver's license or passport).	Patricia Middle name	 Middle name
	Bring your picture identification to your meeting with the trustee.	Galard Last name and Suffix (Sr., Jr., II, III)	 Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	·	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4027	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
		EINs	EINs
5.	Where you live	31067 Steinhauer St	If Debtor 2 lives at a different address:
		Westland, MI 48186 Number, Street, City, State & ZIP Code Wayne	Number, Street, City, State & ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Der	Joanne Patricia G	aiard				Case	number (if known)	
Par	t 2: Tell the Court About	Your Bank	ruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are			rief description of each, see go to the top of page 1 and			.C. § 342(b) for Individu	uals Filing for Bankruptcy
	choosing to file under	■ Chap	ter 7					
		☐ Chap	ter 11					
		☐ Chap	ter 12					
		☐ Chap	ter 13					
8.	How you will pay the fee	abo ord	out how yo	attorney is submitting your p	are paying	the fee yourself,	you may pay with cash	, cashier's check, or money
				the fee in installments. If e in Installments (Official Fo		e this option, sigr	n and attach the Applica	ation for Individuals to Pay
		☐ I re	equest that is not requ	t my fee be waived (You muired to, waive your fee, and	ay request I may do so	only if your inco	me is less than 150% of	of the official poverty line that
				ır family size and you are ur n to Have the Chapter 7 Fili				
9.	Have you filed for	□ No.						
	bankruptcy within the last 8 years?	Yes.						
			District	Eastern District of Michigan	When	7/29/11	Case number	11-60466-pjs
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
			Debtor				Relationship to y	
			District		When		Case number, if	known
11.	Do you rent your residence?	■ No.	Go to li	ne 12.				
		☐ Yes.	Has yo	ur landlord obtained an evic	tion judgme	ent against you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statement</i> this bankruptcy petition.	nt About ar	Eviction Judgm	ent Against You (Form	101A) and file it as part of

Deb	otor 1 Joanne Patricia G	alard			Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Owr	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	niness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you ir ns, cash-f	ndicate that you are low statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of <i>small</i>	■ No.	I am ı	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?	
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
					Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Joanne Patricia G	alard		Case numb	er (if known)
Par	t 6: Answer These Questi	ons for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.	Are your debts primarily of individual primarily for a per	consumer debts? Consumer debts are defresonal, family, or household purpose."	rined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		Dusiness debts? Business debts are debts vestment or through the operation of the business.	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or busine	ss debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. are paid that funds will be a	Do you estimate that after any exempt propagation to distribute to unsecured creditors	perty is excluded and administrative expenses ?
	administrative expenses		■ No		
	are paid that funds will be available for distribution to unsecured creditors?		Yes		
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000
	you estimate that you	☐ 50-99		☐ 5001-10,000	☐ 50,001-100,000
	owe?	☐ 100-19	99	1 0,001-25,000	☐ More than100,000
		□ 200-99	99		
19.	How much do you	□ \$0 - \$t	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
	DC WOITH.		001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion
		□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you	□ \$0 - \$5		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
			001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion
		□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	t7: Sign Below				
For	you	I have exa	amined this petition, and I de	eclare under penalty of perjury that the infor	mation provided is true and correct.
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I c	
				not pay or agree to pay someone who is not he notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this
		I request	relief in accordance with the	chapter of title 11, United States Code, spe	ecified in this petition.
		bankrupto and 3571	cy case can result in fines up	at, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Joanne	ne Patricia Galard Patricia Galard of Debtor 1	Signature of Debto	or 2
		Executed	on July 31, 2019	Executed on	
			MM / DD / YYYY		M / DD / YYYY

Debtor 1	Joanne Patricia Galard	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Karen E	E. Evangelista	Date	July 31, 2019
Signature of	Attorney for Debtor		MM / DD / YYYY
Karen E. E	ivangelista P36144		
Karen E. E	vangelista, PC		
410 W. Un Ste. 225	iversity Drive		
Rochester	, MI 48307		
Number, Street,	City, State & ZIP Code		
Contact phone	248 652-7990	Email address	kee1008@sbcglobal.net
P36144 MI			
Bar number & St	ate		

Fill	in this information to id	lentify your	case:				
Del		Patricia G	Salard				
Deb	First Name		Middle Name	Last Name			
	use if, filing) First Name		Middle Name	Last Name			
Uni	ed States Bankruptcy Co	ourt for the:	EASTERN DISTRIC	T OF MICHIGAN			
	e number					- 0	de Walter to an
(II KI	own)						ck if this is an nded filing
<u>Of</u>	ficial Form 106	Sum					
				and Certain Statis			12/15
info	mation. Fill out all of yo	our schedule	es first; then complet	e the information on this for	h are equally responsible form. If you are filing amend		
			new <i>Summary</i> and ci	neck the box at the top of the	nis page.		
Par	11: Summarize Your	Assets					
							assets of what you own
1.	Schedule A/B: Proper	ty (Official Fo	orm 106A/B)			\$	125,000.00
						· —	
	1b. Copy line 62, Total	personal prop	perty, from Schedule A	VB		\$	9,279.00
	1c. Copy line 63, Total of	of all property	on Schedule A/B			\$	134,279.00
Par	2: Summarize Your	Liabilities					
							liabilities nt you owe
2.				erty (Official Form 106D) , at the bottom of the last pag	ge of Part 1 of Schedule D	\$	78,022.00
3.	Schedule E/F: Creditors 3a. Copy the total claim	s Who Have	Unsecured Claims (Off 1 (priority unsecured c	ficial Form 106E/F) laims) from line 6e of <i>Sched</i> i	ule E/F	\$	0.00
	3b. Copy the total claim	ns from Part	2 (nonpriority unsecure	ed claims) from line 6j of Sch	edule E/F	\$	46,329.93
					Your total liabilities	\$	124,351.93
Par	3: Summarize Your	Income and	Expenses				
4.	Schedule I: Your Income Copy your combined me			dule I		\$	2,466.00
5.	Schedule J: Your Experior Copy your monthly experience					\$	2,481.65
Par	4: Answer These Qu	uestions for	Administrative and S	Statistical Records			
6.	Are you filing for bank ☐ No. You have noth		• • • •		this form to the court with yo	ur other so	chedules.
7.	■ Yes What kind of debt do	ou have?					
				ner debts are those "incurred	by an individual primarily for	a persona	l, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 868.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

ebtor 1	Joanne Patricia Galard First Name Midd	lle Name Last Name		
ebtor 2				
pouse, if filing)		Ille Name Last Name		
nited States Ba	ankruptcy Court for the: _EASTERN	N DISTRICT OF MICHIGAN		
ase number				Check if this is a amended filing
<i>«</i>	400A/D			
	orm 106A/B le A/B: Property			12/15
		t an asset only once. If an asset fits in more than one	a actoriory list the asset i	
_	to Part 2.			
■ Yes. W	to Part 2. /here is the property? Pinhauer St	What is the property? Check all that apply Single-family home	Do not dodust equired a	elaims as exemptions. But
Yes. W	/here is the property?	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
Yes. W 31067 Ste Street address	/here is the property? Pinhauer St , if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secur Creditors Who Have Cla	ed claims on Schedule D: ims Secured by Property. Current value of the
■ Yes. W	/here is the property? Pinhauer St , if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secur Creditors Who Have Cla	ed claims on Schedule D: ims Secured by Property.
Yes. W 31067 Ste Street address	where is the property? Pinhauer St , if available, or other description MI 48188-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	the amount of any secur Creditors Who Have Cla Current value of the entire property? \$125,000.00 Describe the nature of	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$125,000.00 your ownership interest
Yes. W 31067 Ste Street address	where is the property? Pinhauer St , if available, or other description MI 48188-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any secur Creditors Who Have Cla Current value of the entire property? \$125,000.00 Describe the nature of (such as fee simple, te a life estate), if known.	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$125,000.00 your ownership interest nancy by the entireties, o
Yes. W 31067 Ste Street address Westland City	where is the property? Pinhauer St , if available, or other description MI 48188-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	the amount of any secur Creditors Who Have Cla Current value of the entire property? \$125,000.00 Describe the nature of (such as fee simple, te	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$125,000.00 your ownership interest nancy by the entireties, o
Yes. W 31067 Ste Street address	where is the property? Pinhauer St , if available, or other description MI 48188-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	the amount of any secur Creditors Who Have Cla Current value of the entire property? \$125,000.00 Describe the nature of (such as fee simple, te a life estate), if known.	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$125,000.00 your ownership interest nancy by the entireties, o
Yes. W 31067 Ste Street address Westland City Wayne	where is the property? Pinhauer St , if available, or other description MI 48188-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	the amount of any secur Creditors Who Have Cla Current value of the entire property? \$125,000.00 Describe the nature of (such as fee simple, te a life estate), if known.	ed claims on Schedule D: iims Secured by Property. Current value of the portion you own? \$125,000.00 your ownership interest nancy by the entireties, o
Yes. W 31067 Ste Street address Westland City Wayne	where is the property? Pinhauer St , if available, or other description MI 48188-0000	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secur Creditors Who Have Class Current value of the entire property? \$125,000.00 Describe the nature of (such as fee simple, te a life estate), if known. Fee simple	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$125,000.0 your ownership interest nancy by the entireties, o
Yes. W 31067 Ste Street address Westland City Wayne County	Pinhauer St, if available, or other description MI 48188-0000 State ZIP Code	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this ite	the amount of any secur Creditors Who Have Classes Current value of the entire property? \$125,000.00 Describe the nature of (such as fee simple, te a life estate), if known. Fee simple Check if this is con (see instructions) em, such as local	ed claims on Schedule D: iims Secured by Property. Current value of the portion you own? \$125,000.00 your ownership interest nancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Schedule A/B: Property Official Form 106A/B page 1

Debto	or 1 <u>J</u>	oanne Patr	icia Galard		Case number	(if known)	
3. Ca i	rs. vans.	trucks, trac	tors, sport utility ve	hicles, motorcycles			
		,	, , , , , , , , , , , ,				
• \	Yes						
		Manarimi			Do not	deduct secured c	aims or exemptions. Put
3.1	Make:	Mercury		Who has an interest in the property? Check one	the amo	ount of any secure	ed claims on Schedule D:
	Model:	Milan		Debtor 1 only	Credito	rs Who Have Clai	ms Secured by Property.
	Year:	2009 nate mileage:	103,000	Debtor 2 only		t value of the property?	Current value of the portion you own?
		formation:	103,000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire	oroperty:	portion you own:
			Steinhauer St,	At least one of the debtors and another			
		nd MI 4818		☐ Check if this is community property (see instructions)		\$3,500.00	\$3,500.00
	Yes Id the do			rn for all of your entries from Part 2, including			\$3,500.00
Part 3			onal and Household It				
Do yo	ou own c	or have any l	legal or equitable in	terest in any of the following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex		goods and f Major appliar	furnishings nces, furniture, linens	, china, kitchenware			·
	Yes. De	scribe					
				ods and Furnishings 7 Steinhauer St, Westland MI 48188			\$3,000.00
Ex	, No	Televisions a		eo, stereo, and digital equipment; computers, pr nedia players, games	inters, scanners	s; music collecti	ons; electronic devices
				PRinter, Cell Phone 7 Steinhauer St, Westland MI 48188			\$1,000.00
Ex	<i>amples:</i> No	other collecti	figurines; paintings, ions, memorabilia, co	prints, or other artwork; books, pictures, or other illectibles	r art objects; sta	amp, coin, or ba	seball card collections;
	res. De	scribe					
			Angels			1	
				7 Steinhauer St, Westland MI 48188			\$100.00

Official Form 106A/B Schedule A/B: Property page 2

Del	otor 1	Joanne Patricia Galard	Case number (if known)
		ent for sports and hobbies es: Sports, photographic, exercise, and other homusical instruments	obby equipment; bicycles, pool tables, golf clubs, skis; canoes	s and kayaks; carpentry tools;
	No			
L	→ Yes.	Describe		
	Firearn Examp ■ No	ns oles: Pistols, rifles, shotguns, ammunition, and r	elated equipment	
[☐ Yes.	Describe		
_	Clothes Examp	s oles: Everyday clothes, furs, leather coats, design	gner wear, shoes, accessories	
ı	Yes.	Describe		
		Clothing Location: 31067 Steinha	auer St, Westland MI 48188	\$1,000.00
40				
[□No		ement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
	■ Yes.	Describe		
		Jewelry		\$300.00
14. I	Any otl ■ No	Describe her personal and household items you did n Give specific information	ot already list, including any health aids you did not list	
15.		the dollar value of all of your entries from Pa art 3. Write that number here	rt 3, including any entries for pages you have attached	\$5,400.00
Par	t 4: Des	scribe Your Financial Assets		
		vn or have any legal or equitable interest in a	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
[□ No ·	oles: Money you have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file your pet	ition
	_ 100			
			Cash on HAnd	\$20.00
	Examp	its of money oles: Checking, savings, or other financial accounts institutions. If you have multiple accounts in	unts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each.	houses, and other similar
	□ No ■ Yes		Institution name:	
		17.1. Checking	Community Financial Credit Union	\$250.00
				_

Official Form 106A/B

page 3

Schedule A/B: Property

De	ebtor 1 Joanne	Patricia Gal	ard		Case number (if known)	
		17.2.	Checking	PNC Bank		\$104.00
		17.3.	Savings	PNC Bank		\$5.00
18.	■ No		ent accounts with bro	okerage firms, money market a	ccounts	
19.	Non-publicly trac	ded stock and	Institution or issuer i		usinesses, including an interes	st in an LLC, partnership, and
	■ No □ Yes. Give speci		about them me of entity:		% of ownership:	
	Negotiable instrui	ments include pastruments are	personal checks, cas those you cannot tra	tiable and non-negotiable inshiers' checks, promissory note nsfer to someone by signing o	es, and money orders.	
	Retirement or pe Examples: Interes No Yes. List each a	sts in IRA, ERIS	SA, Keogh, 401(k), 4	03(b), thrift savings accounts,	or other pension or profit-sharing	plans
22.		s and prepaym unused deposit	nents s you have made so	that you may continue service	e or use from a company ater), telecommunications compar	nies, or others
	■ No □ Yes			Institution name or indiv	/idual:	
23.	Annuities (A cont	·	, ,	ey to you, either for life or for a	number of years)	
24.	26 U.S.C. §§ 530(b No	ucation IRA, in	and 529(b)(1).		nder a qualified state tuition pro	
25.	☐ Yes Trusts. equitable		·		f any interests.11 U.S.C. § 521(c) ine 1), and rights or powers exe	
	■ No □ Yes. Give speci	ific information	about them	, •	, .	·
		et domain name	es, websites, procee	d other intellectual property ds from royalties and licensing		
	Licenses, franchi	ises, and othe	r general intangible lusive licenses, coop		quor licenses, professional licens	ees
M	oney or property o		about mon			Current value of the portion you own?
						Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

D	ebtor 1	Joanne Patricia Galard	Case number (if known)	
28	■ No	unds owed to you Give specific information about them, including wh	nether you already filed the returns and the tax years	
29	■ No		ort, child support, maintenance, divorce settlement, property	settlement
30		mounts someone owes you les: Unpaid wages, disability insurance payments benefits; unpaid loans you made to someone	, disability benefits, sick pay, vacation pay, workers' compen else	sation, Social Security
31	Yes. Interes	Give specific information ts in insurance policies les: Health, disability, or life insurance; health sav	ings account (HSA); credit, homeowner's, or renter's insuran	се
	■ No □ Yes.	Name the insurance company of each policy and Company name:	list its value. Beneficiary:	Surrender or refund value:
32	If you a someo	erest in property that is due you from someon tre the beneficiary of a living trust, expect proceed ne has died. Give specific information	e who has died is from a life insurance policy, or are currently entitled to rece	ive property because
33	Examp ■ No	against third parties, whether or not you have les: Accidents, employment disputes, insurance concernible each claim	filed a lawsuit or made a demand for payment laims, or rights to sue	
34	■ No	ontingent and unliquidated claims of every na Describe each claim	ture, including counterclaims of the debtor and rights to	set off claims
35	■ No	ancial assets you did not already list Give specific information		
36		_	4, including any entries for pages you have attached	\$379.00
Pa	art 5: Des	scribe Any Business-Related Property You Own or Ha	ave an Interest In. List any real estate in Part 1.	
	No. Go	wn or have any legal or equitable interest in any bus to Part 6. o to line 38.	iness-related property?	
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38	. Accour	nts receivable or commissions you already ear	ned	
	□ No □ Yes.	Describe		

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1	Joanne Patri	cia Galard	Case number (if known)	
39. Offic	e equipment, furni	shings, and supplies ated computers, software, modems, printers, copiers, fax machines,	rugs, telephones, desks, chai	rs, electronic devices
		and compared, command, modernes, printeres, corpreses, rais machines,	rago, toropriorios, acono, orian	, 0.00
□ No □ Ye:	s. Describe			
40. Mach	ninery, fixtures, eq	uipment, supplies you use in business, and tools of your trade		
□ No				
☐ Ye	s. Describe			
41. Inve	ntory			
□ No				
	s. Describe			
42. Inter	ests in partnership	os or joint ventures		
□ No □ Ye:		ormation about them		
	·	Name of entity:	% of ownership:	
			%	
	omer lists, mailing	lists, or other compilations		
□ No.				
∐ Do y	our lists include per	sonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	□No			
	☐ Yes. Describe			
44. Any l	business-related p	roperty you did not already list		
□ No				
	s. Give specific info	rmation		
45 A do	d the dollar value o	of all of your entries from Part 5, including any entries for pages	vou have attached	
		number here		
		and Commercial Fishing-Related Property You Own or Have an Interest In	a.	
	-	y legal or equitable interest in any farm- or commercial fishing-	related property?	
	ou own or nave an o. Go to Part 7.	y iegai oi equitable interest in any fami- oi commercial fishing-	related property:	
ΠY	es. Go to line 47.			
				Current value of the

portion you own?
Do not deduct secured claims or exemptions.

Deb	otor 1 Joanne Pat	ricia Galard		Case number (if known)	
47.	Farm animals Examples: Livestock,	ooultry, farm-raised fish			
_	_				
	□ No □ Yes				
_	→ Yes				
48.	Crops—either growin	g or harvested			
	□No				
	☐ Yes. Give specific int	ormation			
49.	Farm and fishing equ	ipment, implements, machinery, fixtures, a	and tools of trade		
Г	□ No				
	☐ Yes				
50.	Farm and fishing sup	plies, chemicals, and feed			
_	□No				
	⊒ Yes				
	_ 1 00				
51.	Any farm- and comm	ercial fishing-related property you did not	already list		
			•		
	□ No □ Vac Cius sassifis int	in was a stira a			
L	☐ Yes. Give specific inf	ormation			
				Γ	
52.		of all of your entries from Part 6, including			
	TOT I art o. Write that	Tiumber nere			
Part	7: Describe All Pr	operty You Own or Have an Interest in That You	Did Not List Above		
53.		operty of any kind you did not already list? kets, country club membership	?		
	■ No	ters, country club membership			
	■ Yes. Give specific inf	ormation			
	•			г	
54.	Add the dollar value	of all of your entries from Part 7. Write that	at number here		\$0.00
				L	
Part	List the Totals of	f Each Part of this Form			
55	Part 1: Total roal oct	ate, line 2			¢425.000.00
55. 56.			\$3,500.00		\$125,000.00
57.		al and household items, line 15	\$5,400.00		
58.			\$3,400.00		
59.		ss-related property, line 45	\$0.00		
60.		nd fishing-related property, line 52	\$0.00		
61.		roperty not listed, line 54 +	\$0.00		
62.	i otal personal prop	erty. Add lines 56 through 61	\$9,279.00	Copy personal property to	stal \$9,279.00
63.	Total of all property	on Schedule A/B. Add line 55 + line 62			\$134,279.00
	p p-10)			1	Ψ10-7,213.00

Official Form 106A/B

Fill in this inform				
Debtor 1	Joanne Patricia C			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number _				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemp	ptions are	you claiming?	Check one only	, even if	your spouse is	s filing with	vou.
----	--------------------	------------	---------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
31067 Steinhauer St Westland, MI 48188 Wayne County	\$125,000.00		\$46,978.00	Mich. Comp. Laws § 600.5451(1)(m)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	000.545 I(1)(III)
2009 Mercury Milan 103,000 miles Location: 31067 Steinhauer St,	\$3,500.00		\$3,500.00	Mich. Comp. Laws § 600.5451(1)(g)
Westland MI 48188 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	000.343 I(1)(g)
Household Goods and Furnishings Location: 31067 Steinhauer St,	\$3,000.00		\$3,000.00	Mich. Comp. Laws § 600.5451(1)(c)
Westland MI 48188 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	300.3431(1)(6)
TV, Computer, PRinter, Cell Phone Location: 31067 Steinhauer St,	\$1,000.00		\$1,000.00	Mich. Comp. Laws § 600.5451(1)(c)
Westland MI 48188 Line from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit	(X)
Angels Location: 31067 Steinhauer St.	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
Westland MI 48188 Line from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

	description of the property and line on dule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Clot	hing ation: 31067 Steinhauer St,	\$1,000.00		\$1,000.00	Mich. Comp. Laws § 600.5451(1)(a)(iii)
Wes	from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	000.040 I(1)(a)()
Jewo	elry from Schedule A/B: 12.1	\$300.00		\$300.00	Mich. Comp. Laws § 600.5451(1)(a)(iii)
2.110				100% of fair market value, up to any applicable statutory limit	
	h on HAnd from Schedule A/B: 16.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
Line	nom Scriedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
	cking: Community Financial	\$250.00		\$250.00	11 U.S.C. § 522(d)(5)
	from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	cking: PNC Bank from Schedule A/B: 17.2	\$104.00		\$104.00	11 U.S.C. § 522(d)(5)
Line	nom Scriedule A/B. 17.2			100% of fair market value, up to any applicable statutory limit	
	ings: PNC Bank	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.3				100% of fair market value, up to any applicable statutory limit	

Fill in this information	on to identify you	ır case.				
	oanne Patricia					
	rst Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) Fi	rst Name	Middle Name	Last Name			
United States Bankrup	otcy Court for the	EASTERN DISTRICT OF MICH	IGAN			
Casa numbar						
Case number					☐ Check	if this is an
					_	ded filing
Official Form 10	06D					
		Who Have Claims S	Secure	d by Property	v	12/15
				<u> </u>		tion 16 mars and
		If two married people are filing togethe out, number the entries, and attach it to				
1. Do any creditors have	claims secured b	y your property?				
☐ No. Check this	box and submit t	his form to the court with your other:	schedules. Y	ou have nothing else to	report on this form.	
Yes. Fill in all of		•	Jonedanee. 1	ou have hearing olde to		
Part 1: List All Se	cured Claims					
		more than one secured claim, list the cred	litar apparatal	Column A	Column B	Column C
		s a particular claim, list the other creditors		Amount of claim	Value of collateral	Unsecured
much as possible, list the	claims in alphabeti	cal order according to the creditor's name).	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Mr. Cooper		Describe the property that secures the	ne claim:	\$78,022.00	\$125,000.00	\$0.00
Creditor's Name		31067 Steinhauer St Westlan			<u> </u>	
Attn: Bankrup	otcy	48188 Wayne County	,			
8950 Cypress	Waters	As of the date you file, the claim is: (`heck all that			
Blvd	5040	apply.	DIECK all tilat			
Coppell, TX 7		Contingent				
Number, Street, City,	State & Zip Code	Unliquidated				
Who owes the debt?	Chook one	☐ Disputed Nature of lien. Check all that apply.				
_	Sheck one.	_				
Debtor 1 only		An agreement you made (such as m	nortgage or se	cured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor	- ,	☐ Statutory lien (such as tax lien, mec	hanic's lien)			
At least one of the de		Judgment lien from a lawsuit				
☐ Check if this claim r community debt	elates to a	☐ Other (including a right to offset) _				
	Opened					
	06/17 Last					
	Active					
Date debt was incurred	5/06/19	Last 4 digits of account numb	er 6586			
Add the dollar value of	of your entries in C	column A on this page. Write that numb	er here:	\$78,02	2.00	
		the dollar value totals from all pages.		\$78,02		
Write that number he	ie.			, -,		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fi	I in this inforn	nation to identify your case:				
De	ebtor 1	Joanne Patricia Galard				
De	ebtor 2	First Name Mic	dle Name Last Name			
	ouse if, filing)	First Name Mic	dle Name Last Name			
Ur	nited States Bar	nkruptcy Court for the: EASTE	RN DISTRICT OF MICHIGAN			
_						
	ase number (nown)				☐ Check	k if this is an
					amen	ded filing
\bigcirc	ficial Form	106E/E				
			ve Unsecured Claims			12/15
any Sch Sch left nan	executory continedule G: Executive B: Executive B: Credito B: Attach the Conne and case nun	racts or unexpired leases that could tory Contracts and Unexpired Lease ors Who Have Claims Secured by Pr tinuation Page to this page. If you h nber (if known).	r creditors with PRIORITY claims and Part 2 for of result in a claim. Also list executory contracts on the contract of the con	on Schedule A/B: Pro cors with partially sec ou need, fill it out, nu	pperty (Official Fo cured claims that imber the entries	rm 106A/B) and on are listed in in the boxes on the
_		Il of Your PRIORITY Unsecured				
١.	No. Go to Pa	ors have priority unsecured claims a	gamer your			
	Yes.	ait 2.				
	2. List all of your listed, identify much as pos	fy what type of claim it is. If a claim has ssible, list the claims in alphabetical or	reditor has more than one priority unsecured claim, liss both priority and nonpriority amounts, list that claim der according to the creditor's name. If you have mo articular claim, list the other creditors in Part 3.	here and show both p	oriority and nonpric	ority amounts. As
	(For an expl	lanation of each type of claim, see the	instructions for this form in the instruction booklet.)	Total claim	Priority	Nonpriority
2.1			Last 4 digits of account number		amount	amount
	Priority Cre	editor's Name				_
			When was the debt incurred?			
	Number St	treet City State Zip Code	As of the date you file, the claim is: Check all to Contingent	hat apply		
	Who incurred	d the debt? Check one.	☐ Unliquidated			
	Debtor 1 o	only	☐ Disputed			
	Debtor 2 o	only				
		and Debtor 2 only	Towns of BRIGRITY and a second observe			
	_	ne of the debtors and another his claim is for a community debt	Type of PRIORITY unsecured claim: ☐ Domestic support obligations			
		•	_			
		subject to offset?	☐ Taxes and certain other debts you owe the go			
	□ No		☐ Claims for death or personal injury while you w	were intoxicated		
	☐ Yes		Other. Specify			_
Pa	rt 2: List Al	II of Your NONPRIORITY Unsec	ured Claims			
3.	Do any credito	ors have nonpriority unsecured clair	ns against you?			
	☐ No. You have	ve nothing to report in this part. Submit	this form to the court with your other schedules.			
	Yes.					
4.	List all of your unsecured clain	m, list the creditor separately for each of	e alphabetical order of the creditor who holds ear elaim. For each claim listed, identify what type of clair r creditors in Part 3.If you have more than three non	m it is. Do not list clain	ns already included	d in Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 9

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

 \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Notice

Other. Specify Credit Card

Debtor	1 Joanne Patricia Galard	Case number (if known)							
4.4	Beaumont Health System Nonpriority Creditor's Name	Last 4 digits of account number	4789	\$630.00					
	750 Stephenson Highway P.O. Box 5042 Troy, MI 48007-5042	When was the debt incurred?	2/2018						
	Number Street City State Zip Code	is: Check all that apply							
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt		ration agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims							
	No	☐ Debts to pension or profit-sharing							
	Yes	Other. Specify Medical Se	rvices						
4.5	Catherines/Comenity Nonpriority Creditor's Name	Last 4 digits of account number	7181	\$0.00					
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 02/17 Last Active 3/27/17						
	Number Street City State Zip Code								
	Who incurred the debt? Check one.	As of the date you file, the claim	,						
	Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts						
	□Yes	■ Other. Specify NoticeChai	ge Account						
4.6	Citi/Sears Nonpriority Creditor's Name	Last 4 digits of account number	2826	\$7,818.00					
	Citibank/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 08/13 Last Active 8/17/18						
	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply						
	Who incurred the debt? Check one.	•	,						
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Debtor 2 only ☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only								
	☐ At least one of the debtors and another	At least one of the debtors and another Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community								
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	I							
	☐ Yes ☐ Other. Specify Credit Card								

Debtor	Joanne Patricia Galard		Case number (if known)					
4.7	Client Services Nonpriority Creditor's Name	Last 4 digits of account number	3978	\$7,818.50				
	3451 Harry S. Truman Blvd Saint Charles, MO 63301-4047	When was the debt incurred?	2018					
-	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt		ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify						
4.8	Comenity Bank/Kingsize Nonpriority Creditor's Name	Last 4 digits of account number	0625	\$30.00				
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 10/12 Last Active 6/23/19					
-	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one.	,						
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	No	☐ Debts to pension or profit-sharing						
	Yes	Other. Specify Charge Acc	count					
4.9	Comenity/ MPRC	Last 4 digits of account number	2031	\$140.00				
4.3	Nonpriority Creditor's Name			\$140.00				
	Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 01/18 Last Active 6/23/19					
	Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent☐ Unliquidated						
	Debtor 2 only							
	Debtor 1 and Debtor 2 only	- (100)00000						
	At least one of the debtors and another	a ciaim:						
	☐ Check if this claim is for a community debt	☐ Student loans						
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes	■ Other Specify Charge Acc	count					
		- Other. Opeony						

1 Joanne Patricia Galard		Case number (if known)	
Comenitybank/Meijer	Last 4 digits of account number	5624	\$90.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182273 Columbus, OH 43218	When was the debt incurred?	Opened 03/19 Last Active 6/20/19	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
Eye Clinics of Michigan	Last 4 digits of account number	6465	\$148.
Nonpriority Creditor's Name 19335 Allen Rd	When was the debt incurred?	2018	
Brownstown, MI 48183 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , ,		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical Se	rvices	
Financial Recovery Services, Inc.	Last 4 digits of account number	y475	\$4,179.
Nonpriority Creditor's Name Representative of HSBC Card Services	When was the debt incurred?	2000	
P.O. Box 385908 Minneapolis, MN 55438-5908	_		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		

Joanne Patricia Galard		Case number (if known)	
LVNV Funding/Resurgent Capital	Last 4 digits of account number	1836	\$4,179.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 08/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify N.A.	Company Account Capital One	
PNC Bank	Last 4 digits of account number	2800	\$3,992.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 03/17 Last Active	
Po Box 94982: Mailstop	When was the debt incurred?	8/19/18	
Br-Yb58-01-5			
Cleveland, OH 44101	= A. (4) - L. (5) - (5) - (1) - (1)		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	<u> </u>	
Royal Oak Surgical Assoc. PC	Last 4 digits of account number	6049	\$2,365.00
Nonpriority Creditor's Name 3535 West 13 Mile Road Suite 205	When was the debt incurred?	2018	
Royal Oak, MI 48073 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
_	■ Disputed		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
<u></u>	Student loans		
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	agroomon or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
		rvices	

1 Joanne Patricia Galard		Case number (if known)	
St. Joseph Mercy	Last 4 digits of account number	8113	\$202.00
Nonpriority Creditor's Name P.O. Box 993 Ann Arbor, MI 48106-0993	When was the debt incurred?	4/23/2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical Se	rvices	
Synchrony Bank/ JC Penneys	Last 4 digits of account number	4637	\$0.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 956060	When was the debt incurred?	Opened 8/10/17 Last Active 9/07/17	
Orlando, FL 32896		<u> </u>	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	Student loans		
Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify Notice Cha	rge Account	
Synchrony Bank/Walmart	Last 4 digits of account number	5265	\$1,747.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 07/17 Last Active 6/23/19	
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Charge Acc	count	

Debtor	Joanne Patricia Galard	Case number (if known)						
4.1	United Whsle Mort	Last 4 digits of account number	r 4119			Unknown		
	Nonpriority Creditor's Name Attn: Bankruptcy 585 South Blvd E Pontiac, MI 48341	When was the debt incurred?			Last Active			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the clain	n is: Check	all that apply	1			
	Debtor 1 only	Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a se	paration ag	reement or di	vorce that you did not			
	Is the claim subject to offset?	report as priority claims			•			
	No	Debts to pension or profit-shar	ring plans,	and other sim	ilar debts			
	Yes	■ Other. Specify Real Esta	te Mortg	jage				
Part 3:	List Others to Be Notified About a De	bt That You Already Listed						
is tryin have n	is page only if you have others to be notified ng to collect from you for a debt you owe to s nore than one creditor for any of the debts that d for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor at you listed in Parts 1 or 2, list the ad-	in Parts 1	or 2, then list	t the collection agency he	ere. Similarly, if you		
	nd Address	On which entry in Part 1 or Part 2 did yo	ou list the o	riginal credito	r?			
-	I 1 Bank	Line <u>4.13</u> of (<i>Check one</i>):	☐ Part 1:	Creditors with	Priority Unsecured Claims			
	Bankruptcy Dept. x 30285		Part 2:	Creditors with	Nonpriority Unsecured Cla	ims		
	ake City, UT 84130							
	• /	Last 4 digits of account number	18	336				
	nd Address	On which entry in Part 1 or Part 2 did yo		•				
	Krista Cotter Big Beaver				Priority Unsecured Claims			
Ste 20		■ Part 2: Creditors with Nonpriority Unsecured Claims						
		Last 4 digits of account number	32	2GC				
	nd Address	On which entry in Part 1 or Part 2 did yo		•				
	of Michigan				Priority Unsecured Claims			
36675	udicial District Ford Road and, MI 48185		Part 2:	Creditors with	Nonpriority Unsecured Cla	ims		
Westic	iliu, Wii 40103	Last 4 digits of account number	32	2GC				
	nd Address	On which entry in Part 1 or Part 2 did yo		•				
	er & Associates,P.C. sentative for American				Priority Unsecured Claims			
Expres	ss ist Big Beaver Road		Part 2:	Creditors with	Nonpriority Unsecured Cla	ims		
	MI 48083							
,,.		Last 4 digits of account number	32	2GC				
Part 4:	Add the Amounts for Each Type of U	nsecured Claim						
	he amounts of certain types of unsecured cla f unsecured claim.	ims. This information is for statistical	reporting	purposes or	nly. 28 U.S.C. §159. Add th	e amounts for each		
					Total Claim			
Т	6a. Domestic support obligation	s	6a.	\$	0.00			
cla from Pa	nims art 1 6b. Taxes and certain other debt	s you owe the government	6b.	\$	0.00			
		injury while you were intoxicated	6c.	\$ ———	0.00			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 9

Debtor 1 Joanne Patricia Galard

Case number (if known)

ODIO: 1	oaime i	atricia Galard	Outo III	in anomi	,
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				T	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	46,329.93
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	46,329.93

Fill in this infor				
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MICHIGAN	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	•				

5 L	mation to identify your				
Debtor 1	Joanne Patricia (First Name	Galard Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN		
Case number					
(if known)					Check if this is an amended filing
					amonasa ming
Official Fo					
3chedule	H: Your Cod	ebtors			12/15
■ No □ Yes 2. Within the	e last 8 years, have you	you are filing a joint case, I lived in a community pr , Nevada, New Mexico, Pu	operty state or territor	r y? (Community property s	states and territories include
□ No					
	In which community stat	e or territory did you live?		. Fill in the name and	current address of that person.
=	City	State	Zip Code		
in line 2 aga Form 106D) out Column	ain as a codebtor only i), Schedule E/F (Officia	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the 06G). Use Schedule D, So	
				☐ Schedule G, line	
Number	Street				
City		State	ZIP Code		
3.2 Name				☐ Schedule D, line☐ Schedule E/F, line☐ Schedule G, line☐	e
	Street		ZIP Code	☐ Schedule E/F, line	e

Page 1 of 1
Best Case Bankruptcy
Page 30 of 51 Official Form 106H
Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com
19-51046-pjs Doc 1 Filed 07/31/19 Schedule H: Your Codebtors

Fill	in this information to identify your c	ase:								
Del	btor 1 Joanne Patr	icia Galard			_					
	btor 2 puse, if filing)				_					
Uni	ited States Bankruptcy Court for the	EASTERN DISTRICT	OF MICHIGAN							
Ca	se number		_			Check	t if this is:			
(If kı	nown)						n amende	J		
									g postpetition Illowing date:	
0	fficial Form 106I					M	M / DD/ Y	YYY	-	
S	chedule I: Your Inc	ome					, 22, .			12/1
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing wi	ith you, do not includ	le infor	mati	on about	your spo	use. If mo	re space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fil	ing spouse	
	If you have more than one job,	F	☐ Employed	☐ Employed			☐ Emplo	oyed		
	attach a separate page with information about additional employers.	Employment status	■ Not employed				☐ Not er	mployed		
	. ,	Occupation	Retired							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed the	here?				_			
Pa	rt 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any	line, write	\$0 in the	space. Inc	lude your no	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	emplo	oyers for t	hat perso	n on the lir	nes below. If	you need
						For Deb	tor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	(0.00	\$	N/A	

			For	Debtor 1		ebtor 2 or ling spouse	
	Copy line 4 here	4.	\$	0.00	\$	N/A	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d. Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e. Insurance	5e.	\$	0.00	\$	N/A	
	5f. Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g. Union dues	5g.	\$	0.00	\$	N/A	
	5h. Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	
8.	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b. Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c. Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	n t 8c.	\$	0.00	\$	N/A	
	8d. Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e. Social Security	8e.	\$	1,598.00	\$	N/A	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g. Pension or retirement income	8g.	\$_	868.00	\$	N/A	
	8h. Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,466.00	\$	N/A	
10.	Calculate monthly income. Add line 7 + line 9.	10. \$		2,466.00 + \$		N/A = \$	2,466.00
	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			-			
11.	State all other regular contributions to the expenses that you list in Schedul Include contributions from an unmarried partner, members of your household, you other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are no Specify:	ur depen				nedule J. 11. +\$	0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The re Write that amount on the Summary of Schedules and Statistical Summary of Certapplies					12. \$	2,466.00
13.	_ , ,	m?				Combin	ed / income
	No.						
	Yes. Explain:						

Eill	in this informa	tion to identify v	our case.							
	Fill in this information to identify your case: Debtor 1 Joanne Patricia Galard					Check if this is:				
							☐ An amended filing			
Debtor 2 (Spouse, if filing)						A supplement showing postpetition chapter 13 expenses as of the following date: MM / DD / YYYY				
United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN										
	e number nown)									
Of	fficial Fo	rm 106J								
S	chedule	J: Your	Exper	nses				12/15		
Be info	as complete a	and accurate as	possible.	. If two married people ar ich another sheet to this						
Par		ibe Your House	ehold							
1.	Is this a joir									
	■ No. Go to □ Yes. Doe		in a separ	ate household?						
	□ N □ Y	-	st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	hold of De	btor 2.			
2.	Do you have	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?		
	Do not state	the						□ No		
	dependents	names.					_	Yes		
								□ No		
								_ □ Yes □ No		
								□ No □ Yes		
								. □ Yes □ No		
								☐ Yes		
3.	expenses of	oenses include f people other t d your depende	han 🗖	No Yes						
Par		ate Your Ongoi								
exp				uptcy filing date unless y y is filed. If this is a supp				apter 13 case to report of the form and fill in the		
the	value of sucl	h assistance an		government assistance i			Your exp	ooneoe		
(Of	ficial Form 10)6I.)					Tour exp	JE11363		
4.	The rental or home ownership expenses for your residence. Include first mo payments and any rent for the ground or lot.				nclude first mortgage	4.	\$	727.65		
If not included in line 4:										
	4a. Real e	estate taxes				4a.	\$	0.00		
		rty, homeowner's				4b.		0.00		
		•	•	upkeep expenses		4c.		0.00		
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. 5.	\$ \$	0.00		
٥.					oquity iouilo	0.	Ŧ	0.00		

Fill in this info	rmation to identify ye	our case.			
Debtor 1	Joanne Patric				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for th	e: EASTERN DISTRICT	OF MICHIGAN		
Case number					
(if known)				☐ Check if t amended	
Official For		kan Individua	l Dobtorio Cobo	dulaa	
Declara	tion About	an individua	I Debtor's Sche	eaules	12/15
Sig Did you p	gn Below ay or agree to pay so Name of person		orney to help you fill out bankr	uptcy forms? Attach Bankruptcy Petition Preparature (Officen Declaration, and Signature (Officen Declaration)	
	alty of perjury, I decl are true and correct.	are that I have read the su	mmary and schedules filed wit	, 0	, and 1 (1)
	anne Patricia Gala	rd	X		
	ne Patricia Galard ure of Debtor 1		Signature of Debte	or 2	
Date	July 31, 2019		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in this inf	ormation to identify you	ır case:						
Debtor 1	Joanne Patricia							
Debior	First Name	Middle Name	Last Name					
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name					
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN					
Case number					Check if this is an amended filing			
Statemer Be as complet	te and accurate as poss	Affairs for Individualist in two married people a tatach a separate sheet to the second in the secon	re filing together, both are	equally responsible for su				
number (if kno	own). Answer every que	stion.	•	, audinonai pagoo,o ,				
		arital Status and Where You	Lived Before					
1. What is y	our current marital state	ıs?						
☐ Marr	ied							
■ Not r	married							
2. During th □ No	During the last 3 years, have you lived anywhere other than where you live now?							
	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
Debtor 1 Prior Address: 34687 Rolf Westland, MI 48186		Dates Debtor 1 lived there			Dates Debtor 2 lived there			
		From-To: 6/2015 - 7/1/20	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:			
states and terri No Yes. Part 2 Exp	Make sure you fill out Sc		/ada, New Mexico, Puerto R ficial Form 106H).	ico, Texas, Washington and	Wisconsin.)			
Fill in the	total amount of income yo	mployment or from operating ou received from all jobs and a uhave income that you receive	II businesses, including part	-time activities.	endar years?			
_	Fill in the details.							
		Debtor 1		Debtor 2				
		Sources of income	Gross income	Sources of income	Gross income			
		Check all that apply.	(before deductions and	Check all that apply.	(before deductions			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

5.	Include and of	de ind other (ome regard	lless of wheth it payments;	e during this year or the er that income is taxable. pensions; rental income; in e and you have income the	Examples on terest; divide	f <i>other incom</i> e are a dends; money collec	alimony; child suppoted from lawsuits;	; royalties; an	ecurity, unemployment, d gambling and lottery
	List e	ach s	ource and t	he gross inco	me from each source sep	arately. Do i	not include income t	that you listed in lir	ne 4.	
		No								
			Fill in the de	etails.						
					Debtor 1			Debtor 2		
					Sources of income Describe below.	each (before	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
			1 of curre	nt year until nkruptcy:	Social Security Benefits		\$11,186.00			
					Pension		\$6,076.00			
			dar year: December	31, 2018)	Social Security Benefits		\$21,000.00			
					Pension		\$9,628.00			
			lar year be December		Social Security Benefits		\$20,376.00			
					Pension		\$9,628.00			
Pa	rt 3:	List	Certain Pa	vments You	Made Before You Filed f	for Bankrup	otcv			
6.	Are e		Debtor 1's	or Debtor 2'	s debts primarily consulebtor 2 has primarily co	mer debts? nsumer del	ots. Consumer debi	ts are defined in 11	I U.S.C. § 10	1(8) as "incurred by an
			During the	90 days befo	re you filed for bankruptcy	/, did you pa	y any creditor a tota	al of \$6,825* or mo	ore?	
			□ No.	Go to line 7						
			☐ Yes * Subject	paid that cre not include	ach creditor to whom you editor. Do not include payr payments to an attorney fo on 4/01/22 and every 3 y	ments for do or this bankı	mestic support obliquetcy case.	gations, such as ch	hild support a	and alimony. Also, do
		Yes.			r both have primarily corre you filed for bankruptcy			al of \$600 or more?	?	
			■ No.	Go to line 7						
			Yes		ach creditor to whom you	naid a total	of \$600 or more an	d the total amount	you naid tha	t creditor. Do not
			100	include pay	ments for domestic suppo this bankruptcy case.					
	Cred	ditor'	s Name and	d Address	Dates of pay	ment	Total amount paid	Amount you still owe	Was this	payment for

Case number (if known)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Joanne Patricia Galard

Debt	tor 1	Joanne Patricia Galard		Cas	e number (if known)		
•	<i>Inside</i> of whi	n 1 year before you filed for bankruptoers include your relatives; any general patch you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one fo
	_	No Yes. List all payments to an insider.					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
i	inside Includ	le payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a de	ebt that benefited an
		Yes. List all payments to an insider	Dates of navment	Total amount	Amount you	Posson for	this navment
	insia	ier's Name and Address	Dates of payment	paid	still owe	Include credi	this payment itor's name
Part	4:	Identify Legal Actions, Repossession	s, and Foreclosures				
	List al modifi □ N	n 1 year before you filed for bankruptout of such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details.					
	Case		Nature of the case	Court or agency		Status of the	e case
	Ame repr	erican Express National Bank, esented by Zwicker & Assoc., v Joanne Galard 5432-GC	Collection	State of Michig 18th Judicial D 36675 Ford Ro Westland, MI 4	istrict ad	Pending On appe Conclude	al
	Check	n 1 year before you filed for bankrupto c all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	hed, attached	I, seized, or levied?
		litor Name and Address	Describe the Property		Date		Value of the
			Explain what happened				property
;	accou ■ N	n 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fir	nancial institution	, set off any a	mounts from your
	Cred	litor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
	court	n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a		rty in the possess			efit of creditors, a
	⊔ \	Yes					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Deb	otor 1 Joanne Patricia Galard		Case nun	nber (if known)	
Par	t 5: List Certain Gifts and Contribution	ıs			
13.	Within 2 years before you filed for bankr	uptcy, o	did you give any gifts with a total value of mo	ore than \$600 per person?	•
	Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	□ No		did you give any gifts or contributions with a	total value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or c	ontribut	ion.		
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
	Apostolic Faith Church Southgate, MI 48195	,	Offerings & Tithings	Last Year	\$4,000.00
Par	t 6: List Certain Losses				
	Within 1 year before you filed for bankru or gambling? ■ No □ Yes. Fill in the details.	ptcy or	since you filed for bankruptcy, did you lose	anything because of thef	t, fire, other disaster,
	Describe the property you lost and	Descri	be any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Include	e the amount that insurance has paid. List pendince claims on line 33 of Schedule A/B: Property	ng loss	lost
Par	t 7: List Certain Payments or Transfers	8			
	consulted about seeking bankruptcy or p	prepari	id you or anyone else acting on your behalf p ng a bankruptcy petition? s, or credit counseling agencies for services rec		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou′	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Karen E. Evangelista, PC 410 W. University Drive Ste. 225 Rochester, MI 48307 kee1008@sbcglobal.net		Attorney Fees	7/23/2019	\$1,000.00
	Karen Evangelista PC 439 S. Main Ste. 250 Rochester, MI 48307		Credit Report	7/23/2019	\$50.00
	Greenpath Debt Solutions 38505 Country Club Drive Suite 210 Farmington, MI 48331-3429		Debt Counseling	7/23/2019	\$60.00

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you	s or to make payments			or transfer any prope	rty to anyone who
	□ No ■ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and v transferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
	Americor Financial 877 S Adams Birmingham, MI 48009	Since 12/2017 D \$429.31 per mod cards, totaling \$	nth to pay off		Last 20 months	\$429.31
	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but Include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa de as security (such as t	i rs? he granting of a s			
	Person Who Received Transfer Address	Description and v property transferr			any property or s received or debts xchange	Date transfer was made
19.	Person's relationship to you Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prof ■ No □ Yes. Fill in the details.		y property to a s	self-settled ti	rust or similar device o	of which you are a
	Name of trust	Description and v	alue of the prop	erty transfer	red	Date Transfer was made
Par	List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and Sto	orage Units		
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No Yes. Fill in the details.	other financial accour	nts; certificates	of deposit; s		
		Last 4 digits of account number	Type of accou instrument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 you cash, or other valuables?	ear before you filed for	bankruptcy, an	y safe depos	it box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit of		home within 1	year before y	ou filed for bankruptc	y?
	NoYes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Pa	nt 9: Identify Property You Hold or Control	for Someone Else						
23.	Do you hold or control any property that sor for someone.	meone else owns? Include any prope	erty you bo	orrowed from, are storing fo	or, or hold in trust			
	No							
	☐ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describ	pe the property	Value			
Pa	art 10: Give Details About Environmental Info	rmation						
For	r the purpose of Part 10, the following definition	ons apply:						
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surface water, grour	• .					
	Site means any location, facility, or property to own, operate, or utilize it, including dispo	•	l law, whe	ther you now own, operate,	or utilize it or used			
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,		ıs waste, l	hazardous substance, toxic	substance,			
Rep	port all notices, releases, and proceedings tha	nt you know about, regardless of whe	en they oc	curred.				
24.	Has any governmental unit notified you that	you may be liable or potentially liable	e under o	r in violation of an environm	nental law?			
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		rironmental law, if you w it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	_	rironmental law, if you w it	Date of notice			
26.	Have you been a party in any judicial or adm	ninistrative proceeding under any en	vironment	al law? Include settlements	and orders.			
	■ No							
	Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	of the case	Status of the case			
Pa	art 11: Give Details About Your Business or 0	Connections to Any Business						
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have a	iny of the	following connections to an	y business?			
	☐ A sole proprietor or self-employed in		-	_	•			
	☐ A member of a limited liability compa			·				
	☐ A partner in a partnership		,					
	☐ An officer, director, or managing exe	ecutive of a corporation						
	☐ An owner of at least 5% of the voting	-	1					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Del	otor 1 Joanne Patricia Galard		Case number ((if known)
	☐ No. None of the above applies. Go to F	Part 12.		
	Yes. Check all that apply above and fill	I in the details below for each business.		
	Business Name Address	Describe the nature of the business		r Identification number clude Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates bu	siness existed
	Steinhauer Unlimited	sale of used clothing	EIN:	ssi number
			From-To	Fall 2016 to fall 2017
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties. No Yes. Fill in the details below.	tcy, did you give a financial statement to	anyone abou	nt your business? Include all financial
	Name	Date Issued		
	Address (Number, Street, City, State and ZIP Code)	Date issued		
Par	t 12: Sign Below			
are with	ve read the answers on this <i>Statement of Fir</i> true and correct. I understand that making a a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571. Joanne Patricia Galard	false statement, concealing property, or	r obtaining m	oney or property by fraud in connection
	anne Patricia Galard nature of Debtor 1	Signature of Debtor 2		
Dat	ge _July 31, 2019	Date		
Did	you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fi	ling for Bankr	ruptcy (Official Form 107)?
				
□ Y	es			
Did ■ N	you pay or agree to pay someone who is no	t an attorney to help you fill out bankrup	tcy forms?	
	es. Name of Person Attach the <i>Bankru</i>	uptcy Petition Preparer's Notice, Declaration	n, and Signatui	re (Official Form 119).
			-	

United States Bankruptcy Court Eastern District of Michigan

In re	Joann	e Patricia Galard	Case No).
		Debtor(s)	Chapter	7
		STATEMENT OF ATTORNEY FOR D PURSUANT TO F.R.BANKR.P. 20		
	The und	lersigned, pursuant to F.R.Bankr.P. 2016(b), states that:		
1.	The und	lersigned is the attorney for the Debtor(s) in this case.		
2.	The con	npensation paid or agreed to be paid by the Debtor(s) to the undersigned	is: [Check one]	
	[X]	FLAT FEE		
	A.	For legal services rendered in contemplation of and in connection with exclusive of the filing fee paid		795.00
	B.	Prior to filing this statement, received		795.00
	C.	The unpaid balance due and payable is		0.00
	[]	RETAINER		
	A.	Amount of retainer received		
	B.	The undersigned shall bill against the retainer at an hourly rate of \$ agreed to pay all Court approved fees and expenses exceeding the am	[Or attach firm hount of the retainer.	ourly rate schedule.] Debtor(s) have
3.	\$335	5.00 of the filing fee has been paid.		
4.		n for the above-disclosed fee, I have agreed to render legal service for all not apply.]	aspects of the bankru	ptcy case, including: [Cross out any
	A.	Analysis of the debtor's financial situation, and rendering advice to the bankruptcy;	debtor in determining	g whether to file a petition in
	B.	Preparation and filing of any petition, schedules, statement of affairs a		
	C. D. ——	Representation of the debtor at the meeting of creditors and confirmati Representation of the debtor in adversary proceedings and other conte		
	E.	Reaffirmations;	sied summapies maide	,
	F. G.	Redemptions; —Other:		
5.		ement with the debtor(s), the above-disclosed fee does not include the fo	llowing conviges	
J.	by agre	Representative of the debtors in any dischargeability action actions or any other adversary proceedings. Fees by applic	ıs, judicial lien avo	idances, relief from stay
6.	The sou A. B.	rce of payments to the undersigned was from: Debtor(s)' earnings, wages, compensation for service Other (describe, including the identity of payor)	es performed	
7.		dersigned has not shared or agreed to share, with any other person, other tion, any compensation paid or to be paid except as follows:	than with members of	the undersigned's law firm or
Dated:	July	31, 2019	/s/ Karen E. Evang	gelista
			Attorney for the Debt Karen E. Evangelis Karen E. Evangelis 410 W. University Ste. 225 Rochester, MI 483 248 652-7990 kee1	sta P36144 sta, PC Drive
Agreed:	/s/ Jo	panne Patricia Galard		
		ne Patricia Galard	D.L.	
	Debto	or	Debtor	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	on
\$24	5 filing fee	
\$7	5 administrati	ve fee
+ \$1	5 trustee surc	charge
\$33	5 total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

Debtor(s)	Chapter	7
ON OF CREDITOR	R MATRIX	
thed list of creditors is true and	correct to the best	of his/her knowledge.
/s/ Joanne Patricia Galard		
•	ched list of creditors is true and	ION OF CREDITOR MATRIX The list of creditors is true and correct to the best /s/ Joanne Patricia Galard

Signature of Debtor

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

ARS National Services, Inc. PO Box 469100 Escondido, CA 92046-9100

Barclays Bank Delaware Attn: Correspondence Po Box 8801 Wilmington, DE 19899

Beaumont Health System 750 Stephenson Highway P.O. Box 5042 Troy, MI 48007-5042

Capital 1 Bank Attn: Bankruptcy Dept. Po Box 30285 Salt Lake City, UT 84130

Catherines/Comenity Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Citi/Sears Citibank/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Client Services 3451 Harry S. Truman Blvd Saint Charles, MO 63301-4047

Comenity Bank/Kingsize Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity/ MPRC Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenitybank/Meijer Attn: Bankruptcy Po Box 182273 Columbus, OH 43218

Eye Clinics of Michigan 19335 Allen Rd Brownstown, MI 48183

Financial Recovery Services, Inc. Representative of HSBC Card Services P.O. Box 385908 Minneapolis, MN 55438-5908

LVNV Funding/Resurgent Capital Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

Mr. Cooper Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell, TX 75019

PNC Bank Attn: Bankruptcy Po Box 94982: Mailstop Br-Yb58-01-5 Cleveland, OH 44101

Ranta, Krista Cotter 320 E Big Beaver Ste 200 Troy, MI 48083

Royal Oak Surgical Assoc. PC 3535 West 13 Mile Road Suite 205 Royal Oak, MI 48073

St. Joseph Mercy P.O. Box 993 Ann Arbor, MI 48106-0993

State of Michigan 18th Judicial District 36675 Ford Road Westland, MI 48185

Synchrony Bank/ JC Penneys Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

United Whsle Mort Attn: Bankruptcy 585 South Blvd E Pontiac, MI 48341

Zwicker & Associates, P.C. Representative for American Express 320 East Big Beaver Road Suite 100 Troy, MI 48083